

State of Colorado
Oil and Gas Conservation Commission

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Document Number:

401818678

Date Received:

11/15/2018

Spill report taken by:

GINTAUTAS, PETER

Spill/Release Point ID:

455941

SPILL/RELEASE REPORT (SUPPLEMENTAL)

This form is to be submitted by the party responsible for the oil and gas spill or release. Refer to COGCC Rule 906.b. for reporting requirements of spills or releases of E&P Waste or produced fluids. Submit a Site Investigation and Remediation Workplan (Form 27) when requested by the Director.

OPERATOR INFORMATION

Name of Operator: <u>KERR MCGEE OIL & GAS ONSHORE LP</u>	Operator No: <u>47120</u>	Phone Numbers
Address: <u>P O BOX 173779</u>		Phone: <u>(970) 336-3500</u>
City: <u>DENVER</u>	State: <u>CO</u>	Zip: <u>80217-3779</u>
Contact Person: <u>Gregory Hamilton</u>		Mobile: <u>(970) 515-1698</u>
		Email: <u>Gregory.Hamilton@ana-darko.com</u>

INITIAL SPILL/RELEASE REPORT

Initial Spill/Release Report Doc# 401699123

Initial Report Date: 07/11/2018 Date of Discovery: 07/09/2018 Spill Type: Historical Release

Spill/Release Point Location:

Location of Spill/Release: QTRQTR NESE SEC 30 TWP 2N RNG 67W MERIDIAN 6

Latitude: 40.107888 Longitude: -104.925626

Municipality (if within municipal boundaries): Frederick County: WELD

Reference Location:

Facility Type: TANK BATTERY☐ Facility/Location ID No

Spill/Release Point Name: _____

☒ No Existing Facility or Location ID No.

Number: _____

☐ Well API No. (Only if the reference facility is well) 05- -

Fluid(s) Spilled/Released (please answer Yes/No):

Was one (1) barrel or more spilled outside of berms or secondary containment? Yes

*Secondary containment, **including walls & floor regardless of construction material**, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.*

Were Five (5) barrels or more spilled? No

Estimated Total Spill Volume: use same ranges as others for values

Estimated Oil Spill Volume(bbl): UnknownEstimated Condensate Spill Volume(bbl): UnknownEstimated Flow Back Fluid Spill Volume(bbl): 0Estimated Produced Water Spill Volume(bbl): UnknownEstimated Other E&P Waste Spill Volume(bbl): 0Estimated Drilling Fluid Spill Volume(bbl): 0

Specify: _____

Land Use:

Current Land Use: CROP LAND

Other(Specify): _____

Weather Condition: Sunny, ~ 95 degrees F.Surface Owner: FEE

Other(Specify): _____

Check if impacted or threatened by spill/Release (please answer Yes/No to all that apply):

Waters of the State ☐ Residence/Occupied Structure ☐ Livestock ☐ Public Byway ☐ Surface Water Supply Area ☐

As defined in COGCC 100-Series Rules

Describe what is known about the spill/release event (what happened -- including how it was stopped, contained, and recovered):

Historical impacts were discovered during abandonment activities at the Rocky Mountain Fuel CO E1/Frederick 15-30/Frederick 16-30/Russel Tom C True 1 production facility. The release became State reportable on July 9, 2018, due to the quantity of impacted soil excavated. Soil excavation activities are ongoing and will be summarized in a forthcoming Supplemental Form 19 Spill/Release Report. A topographic Site Location Map showing the geographic setting of the release is provided as Figure 1.

List Agencies and Other Parties Notified:

OTHER NOTIFICATIONS

Date	Agency/Party	Contact	Phone	Response
7/9/2018	County	Tom Parko	-email	
7/9/2018	County	Roy Rudisill	-email	
7/9/2018	Town of Frederick	J. Simmons	-email	
7/9/2018	Private	Landowner	-email	

Was there a Grade 1 Gas Leak associated with this E & P waste spill or release? Yes ☐ No ☒

If YES, enter the Document Number of the Initial Grade 1 Gas Leak Report Form 44: _____

Was there a reportable accident associated with this E & P waste spill or release? Yes ☐ No ☒

If YES, enter the Document Number of the Initial Accident Report, Form 22: _____

SPILL/RELEASE DETAIL REPORTS

#1	Supplemental Report Date: 10/31/2018		
FLUIDS	BBL's SPILLED	BBL's RECOVERED	Unknown
OIL	_____	_____	<input checked="" type="checkbox"/>
CONDENSATE	_____	_____	<input checked="" type="checkbox"/>
PRODUCED WATER	_____	_____	<input checked="" type="checkbox"/>
DRILLING FLUID	0	0	<input type="checkbox"/>
FLOW BACK FLUID	0	0	<input type="checkbox"/>
OTHER E&P WASTE	0	0	<input type="checkbox"/>
specify: _____			
Was spill/release completely contained within berms or secondary containment? <u>NO</u> Was an Emergency Pit constructed? <u>NO</u>			
<i>Secondary containment, including walls & floor regardless of construction material, must be sufficiently impervious to contain any discharge from primary containment until cleanup occurs.</i>			
A Form 15 Pit Report shall be submitted within 30 calendar days after the construction of an emergency pit			
Impacted Media (Check all that apply) <input checked="" type="checkbox"/> Soil <input type="checkbox"/> Groundwater <input type="checkbox"/> Surface Water <input type="checkbox"/> Dry Drainage Feature			
Surface Area Impacted: Length of Impact (feet): <u>85</u>		Width of Impact (feet): <u>45</u>	
Depth of Impact (feet BGS): <u>11</u>		Depth of Impact (inches BGS): _____	
How was extent determined?			
Reference Supplemental Form 19 (Document No. 401706363) and Initial eForm 27 (Document No. 401714663).			
Soil/Geology Description:			
Clayey sand			

Number Water Wells within 1/2 mile radius: 7

Surface Water	1620	None	<input type="checkbox"/>
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Sprints ☐ None ☒

Occupied Building 615 None ☐

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Spill/Release Reports should be closed when impacts have been remediated or when further investigation and corrective actions will take place under an approved Form 27.

☒ Work proceeding under an approved Form 27

Form 27 Remediation Project No: 11647

Signed: _____ Print Name: Gregory Hamilton

Title: Sr. Staff HSE Rep Date: 11/15/2018 Email: Gregory.Hamilton@anadarko.com

Attachment Check List

Total Attach: 2 Files

General Comments

Total: 0 comment(s)